United States Patent and Trademark Office
- Sales Receipt -

01/30/2006 KCOOPER1 00000001 024800 10790753

01 FC:1201 400.00 DA 02 FC:1202 150.00 DA

|   |   |   |                                |                                      |                      |                  |          | Application or Docket Number |                        |          |                     |                        |  |
|---|---|---|--------------------------------|--------------------------------------|----------------------|------------------|----------|------------------------------|------------------------|----------|---------------------|------------------------|--|
| PATENT APPLICATION FEE DETERMINATION RECO<br>Effective October 1, 2003                |   |   |                                |                                      |                      |                  |          | 10790753                     |                        |          |                     |                        |  |
| CLAIMS AS FILED - PART I SMALL ENTITY OTHER TO (Column 1) (Column 2) TYPE OR SMALL EN |   |   |                                |                                      |                      |                  |          |                              |                        |          |                     |                        |  |
| TOTAL CLAIMS  |   |   | 24                             |                                      | · .                  |                  |          | RATE FEE                     |                        | ٦        | RATE                | FEE                    |  |
| FOR   |   |   | NUMBER FILED                   |                                      | NUM                  | NUMBER EXTRA     |          | BASIC FI                     | EE 385.0               | OF       | BASIC FEI           | 770.00                 |  |
| TOTAL CHARGEABLE CLAIMS   |   |   | 2 1/2 minus 20=                |                                      | •                    | 4                |          | XS 9=                        |                        | OR       | X\$18=              | 22                     |  |
| INDEPENDENT CLAIMS  |   |   | 3 in                           | ninus 3 =                            | • 2                  | 0                |          | X43=                         | +-                     | <b>-</b> | Vac                 | 1-1/2-1                |  |
| М   | JLTIPLE DEPE  | NDENT CLAIM P                               | RESENT                         |                                      |                      |                  |          |                              |                        | -        |                     |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2              |   |   |                                |                                      |                      |                  | +145=    |                              | OR                     | <u> </u> | SKY                 |                        |  |
|   | CLAIMS AS AMENDED - PART II   |   |                                |                                      |                      |                  |          |                              | ٠ ــــــ               | JOR      |                     | 0/2                    |  |
| (Column 1) (Column 2) (Column 3)  |   |   |                                |                                      |                      |                  |          | SMALL                        | ENTITY                 | OR       | OTHER<br>SMALL      |                        |  |
| ENTA  |   | CLAIMS<br>REMAINING<br>AFTER .<br>AMENDMENT |                                | HIGHI<br>NUME<br>PREVIO<br>PAID F    | ER<br>USLY           | PRESENT<br>EXTRA |          | RATE                         | ADDI-<br>TIONAL<br>FEE | 1        | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| AMENDMENT   | Total   | . 24  | Minus                          | -2                                   | 4                    | .0               | l        | X\$ 9=                       |                        | OR       | X318=               |                        |  |
| E E   | Independent   | . 3   | Minus                          | otto .                               | 3                    | -0               | İ        | X43=                         | 1                      | -        | X86=                |                        |  |
|   | FIRST PRESE   | ENTATION OF MI                              | JLTIPLE DE                     | PENDENT                              | CLAIM                |                  | <b> </b> |                              | ++-                    | OR       | /                   |                        |  |
|   |   |   |                                | •                                    |                      | •                | L        | +145=                        | 17                     | OR       | 4290=<br>107AU      |                        |  |
| (Column 4)  |   |   |                                |                                      |                      |                  |          | DOIT. FEE                    |                        | JOR .    | ADDIT. FEE          |                        |  |
| _   | <u>.                                      </u>  | (Column 1)<br>CLAIMS                        |                                | (Colum                               | ST                   | (Column 3)       | lr       | <del></del> -                | ADDI-                  | 1 1      |                     | 4001                   |  |
| AMENDMENT B   |   | REMAINING<br>AFTER                          |                                | PREVIO                               | USLY                 | PRESENT<br>EXTRA |          | RATE                         | TIONAL                 |          | RATE                | ADDI-<br>TIONAL        |  |
|   | Total   | • DA  | Minus                          | PAID F                               | OR<br>J              | . Q              | ┟        | -e 2X                        | FEE.                   | 1        | X\$18₌              | FEE                    |  |
|   | Independent   | • 5   | Minus                          | <b></b> (                            | <del>3</del> '-      | • a:             | ┞        |                              | •                      | OR       | 7 590               | 150                    |  |
| ₹   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM .                                      |   |                                |                                      |                      |                  | -        | X43=                         |                        | OR       | X88=                | 400                    |  |
|   |   |   |                                |                                      |                      |                  | L        | +145=                        |                        | OR       | +290=               |                        |  |
|   |   |   |                                |                                      |                      |                  | AI       | TOTAL<br>DOTT. FEE           |                        | OR       | TOTAL<br>ADDIT, FEE | 550                    |  |
| _   | ·   |   | •                              | • •                                  |                      |                  |          |                              |                        |          |                     |                        |  |
| AMENDMENT C   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   | _                              | HIGHE<br>NUMBE<br>PREVIOU<br>PAID FO | ER<br>ISLY           | PRESENT<br>EXTRA | ſ        | RATE                         | ADDI-<br>TIONAL<br>FEE |          | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|   | Total   | •   | Minus                          | -                                    |                      |                  | Γ        | X\$ 9=                       |                        | OR       | X\$18=              |                        |  |
|   |   |   | Minus                          | 444                                  | •                    | •                | ┢        | X43=                         |                        |          | X86=                | ——                     |  |
| 1   | FIRST PRESE   | NTATION OF MU                               | LTIPLE DEP                     | ENDENT (                             | MIAL                 |                  | ·  -     |                              |                        | OR       |                     |                        |  |
| • H   | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |                                |                                      |                      |                  |          |                              |                        |          |                     |                        |  |
|   | the "Highest Nurt<br>the "Highest Nurt  | tber Previously Pak<br>nber Previously Pal  | i For in This<br>i For in This | SPACE IS IN                          | ess than<br>ess than | 20, enter "20."  |          | TOTAL<br>DIT. FEE            | ••                     |          | DOIT. FEEL          |                        |  |
| ·T  | he "Highest Numb  | per Previously Paid                         | For" (Total or                 | Independent                          | ) is the             | highest number   | found    | i in the app                 | propriate bar          | in colu  | mn 1.               |                        |  |